THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND); (a) Yes, Sir.

(b) The Government has launched a Sub-Mission on Control of Fluorosis under the Rajiv Gandhi National Drink-ihg Water Mission (RGNDWM) with emphasis on supply of safe drinking water and installatioln of defluoridation plants in the endemic areas.

Symposium on Vector-borne diseases

86. SHRI B. K. HARIPRASAD: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) what were the significant aspects of deliberations held during the Bhubanesh-war Symposium on Vector-borne diseases including guinea-worm disease which js still prevalent in Rajasthan, Karnataka and Madhya Pradesh;

(b) what are the flnhuai allocations earmarked for the eradication of guines-wormdisease all over the country and whether akiy grant from World Health Organisation is also received in this re gard;

(c) whether it is a fact that developing countiies like Bahgladesh, Burma, Iraq and Iran held successfully eradicated guinea-worm disease decades ag°> while India j_s still to d_0 so. and

(d) what is the deadline India set to make the nation free of this disease?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) This sysmosium oh| the epidemiological prevention and con-, trol aspects of various vectorborne diseases discussed the achivements of the National Guinea-worm Eradication Programme in India.

(b) The annua] allocatioh by this Mini stry during current Year is of the order of Rs. 50 lakhs. WHO would provide Rs. . 24.06 lakhs.

(c) These countries are not reporting any guinea-worm cases.

(d) India has already achieved more than 99 per cent decline in the incidence of Guinea-worm disease and the country is likely to achieve zero percetat guinea-worm disease transmission during the year 1995-96.

Meastres to prevent rapid growth of population

*87. SHRI RAMDAS AGARWAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a.) whether Government's attention has been drawn to a newsitem published in the "Hindustan Times' dated the 21st November, 1994 captioned "India's population to crosj 100 m. mark" by the end of the current century and that population figure would stand at 101 crores by 2000 A.D. and grow up to 216 crore by 2050 according to the Registrar General of India;

tbj whether it is a fact that the strict family planning methods adopted by country like China were likely to bear fruit and their population was projected to grow onjy upto 140 crore by 2050;

(c) whether Government are aware that the continued population increase in India would worsen social tension and would have an adverse impact on the environ ment, a major threat being faced by developing nations;

(d) if so, what steps Government of India have taken so far in this direction to check further increase in population of the country;

(e) which States implemented family planning procedure in an exemplary manner and which are not strictly following family planning methods in the country; and

(f) whether Government propose to adopt compulsory registration of mar riages also, if so, by when and if not, the reasons therefor?

THE MINISTER OF HLALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) Govsmment has seen the press report.

(b) According to the National Report of Government of China on Population and Development, the National Fumily Planning Policy is not concrned only with the concept of child hearing but also socio-economic development of the coun try and the Government of China hopes that population size can be contained to between 1.5 to 1.6 billion by the middle of the next century.

(c) Yes, Sir.

(d) An Action Plan covering improvement in the quality and out-reach of services, differential approach to poor pet-forming areas, innovative approaches in IEC activities, greater involvement of NGOs, active eommuni y participation, improved mother and child health care, etc. is being implemented.

(e) States like Kerala, Tamil Nadu and Goa have performed better, whereas States like Bihar, Madhya Pradesh, Rajas-than and Uttar Pradesh are lagging behind.

(f) According to the Registrar General of India, a proposal to enact a legislation for making the registration of marriages compulsory is under consideration of Government.

जे०के० कैन्सर संस्थान, कानपुर का दर्जा बढ़ाया जाना

88. **चौधरी हरमोहन सिंह:** क्या **स्वास्थ्य और परिवार कल्याण** मंत्री यह बताने की कृपा करेंगे कि :

(क) क्या सरकार ने 30 सितम्बर, 1994 तक जे० के० कैंसर संस्थान का दर्जा बढ़ाने और इस संस्थान को वित्तीय सहायता प्रदान करने की दिशा में क्या प्रयास किये हैं ;

(ख) क्या सरकार ने उक्त कार्यों के अनुरोध को स्वीकार कर लिया है; और

(ग) यदि नहीं, तो उसके क्या कारण है ?

स्वास्थ्य और परिवार कल्याण मंत्री (श्री बी० शंकरानन्द) : (क) से (ग) उत्तर प्रदेश सरकार को वर्ष 1993–94 के दौरान जे०के० कैंसर संस्थान, कानपुर में कैंसर कीमोथैरेपी यूनिट के उपचार के लिए थिरेपी यूनिट की स्थापना हेतु 50 लाख रुपये की राशि प्रदान की गई है।

Teaiii of experts from "WHO' to inveitigjte (he outbreak of Plague

MISS SAROJ KHAPARDE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(aj whether the World Health Organisation had recently set up an international team of experts to investigate in India the outbreak of Plague;

(b) if so, whether the said team of experts has since submitted its report to the India Government; and

(c) if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) to (c) Yes, Sir. A Draft Executive Report has been received. The recommendations inter alia cover th[e] following operational areas :

(i) Need for laboratories to develop capabilities for primary isolation and biochemical and phage characterization of Y. Pestis.

(ii) Need to obtain and characterize pure cultures of Y. Pestis by subcnltur-ing existing cultures and by primary isolation methods.

(iii) Development of surveillence) capabilities for Plague in India including network of epidemiologic, laboratory and etffelogic capabilities.